FORM D







NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Company Interests of Liberty View Alternative Blend Fund, LLC							
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment							
A. BASIC IDENTIFICATION DATA							
1. Enter the information requested about the issuer							
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) LibertyView Alternative Blend Fund, LLC							
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Neuberger Berman, LLC, Waterfront Corporate Center-Suite 1000, 111 River Street, Hoboken, New Jersey 07030-5776 Telephone Number (Including Area Code) (201) 216-8600							
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)							
Brief Description of Business Private Investment Fund investing in affiliated Fund							
Type of Business Organization Corporation Dimited partnership, already formed business trust Dimited partnership, to be formed Other (please specify): Limited Liability Company Interests Limited Liability Company Interests							
Actual or Estimated Date of Incorporation or Organization: Month Year Moth Year Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) DE							
CENTED AL INICIDITORIO							

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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SEC 1972 (6-02)

A. BASIC I	DENTIFICATION DAT	Ά ,	
2. Enter the information requested for the following:		· · · · · · · · · · · · · · · · · · ·	
Each promoter of the issuer, if the issuer has been organize	d within the past five years	s;	
 Each beneficial owner having the power to vote or dispose the issuer; 	, or direct the vote or disp	osition of, 10%	or more of a class of equity securities o
Each executive officer and director of corporate issuers and	of corporate general and i	managing partn	ers of partnership issuers; and
• Each general and managing partner of partnership issuers.			
Check Box(es) that Apply: Promoter Beneficial Owner *Manager of the Issuer	Executive Officer	Director	★General and/or Managing Partner
Full Name (Last name first, if individual)			
Neuberger Berman Asset Management, LLC (the Manage	e r'')		
Business or Residence Address (Number and Street, City, State, Zip	Code)		
Waterfront Corporate Center-Suite 1000, 111 River Street, Hob	oken, New Jersey 07030-	5776	
Check Box(es) that Apply: Promoter Beneficial Owner *President and Chief Executive Officer of the Manager		Director	General and/or Managing Partner
Full Name (Last name first, if individual)	₹	· 	
Sundman, Peter E.			
Business or Residence Address (Number and Street, City, State, Zip	Code)		
c/o Neuberger Berman, LLC, 605 Third Avenue, New York, 101	58	!	
Check Box(es) that Apply: Promoter Beneficial Owner *Chief Financial Officer and Senior Vice President of the	*Executive Officer Manager	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		· · · · · · · · · · · · · · · · · · ·	
Gengler, Thomas E. Jr.			
Business or Residence Address (Number and Street, City, State, Zip c/o Neuberger Berman, LLC, 605 Third Avenue, New York, 101	,	÷	
Check Box(es) that Apply: Promoter Beneficial Owner *Executive Vice President of the Manager	*Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Гraversa, Robert P.			
Business or Residence Address (Number and Street, City, State, Zip	Code)		
c/o Neuberger Berman, LLC, 605 Third Avenue, New York, 101	58		
Check Box(es) that Apply: Promoter Beneficial Owner *Secretary of the Manager	★Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Katz, David L.			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Waterfront Corporate Center-Suite 1000, 111 River Street, Hoboken, New Jersey 07030-5776

Business or Residence Address (Number and Street, City, State, Zip Code) c/o Neuberger Berman, LLC, 605 Third Avenue, New York, 10158

Check Box(es) that Apply: Promoter Beneficial Owner

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

*Vice President and Assistant Secretary of the Manager

Check Box(es) that Apply: Promoter Beneficial Owner

Full Name (Last name first, if individual)

Full Name (Last name first, if individual)

Rogers, Steven S.

☐ Executive Officer

☐ Director

☐ General and/or

General and/or
Managing Partner

Managing Partner

			•]	B. INFOR	MATION	ABOUT	OFFERI	NG					
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No ⊠						
Answer also in Appendix, Column 2, if filing under ULOE.															
2. What is the minimum investment that will be accepted from any individual?									\$ <u>1,000,</u>	000*					
*(the Manager may, in its sole discretion reduce the size of a minimum purchase)															
3. Does the offering permit joint ownership of a single unit?								Yes ⊠	No						
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.															
Ful	l Name (Last r	ame first,	if individu	ıal)							_				
	siness or Resid Third Aver					State, Zip	Code)			:					
	me of Associat														
Sta	tes in Which P	erson List	ed Has Sol	licited or I	ntends to S	Solicit Purc	hasers			:					
	(Check	"All State	s" or checl	k individua	al States)									🛭 A	ll States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Ful	l Name (Last r		if individu	nal)											
745	siness or Resid 5 Seventh Av	enue, No	ew York,			State, Zip (Code)				-				
	hman Broth		or Dealer												
Stat	tes in Which P	erson List	ed Has Sol	licited or I	ntends to S	Solicit Purc	hasers								
	(Check "All	States" or	check indi	vidual Sta	tes)				• • • • • • • • • • • • • • • • • • • •	•••••••••••				🛭 A	ll States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID] [MO] [PA] [PR]		
Ful	l Name (Last n	ame first,	if individu	ıal)											
Bus	siness or Resid	ence Addr	ess (Numb	per and Str	eet, City,	State, Zip (Code)								
Nar	ne of Associat	ed Broker	or Dealer							<u> </u>					
Sta	tes in Which P	erson List	ed Has Sol	icited or I	ntends to S	Solicit Purc	hasers								
	(Check "All	States" or	check indi	vidual Sta	tes)									🗌 А	ll States
	[AL] (IL) (MT) (RI)	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
			(Use t	olank sheet	t, or copy a	and use add	ditional co	pies of this	sheet, as	necessary.)				

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	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	S AND USE OF PROC	CEEDS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$·
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	
	Other (Specify <u>Limited Liability Company Interests</u>)	\$150,000,000	\$10,697,024
	Total	\$150,000,000_	\$10,697,024
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	\$ <u>10,697,024</u>
	Non-accredited Investors	-:	\$
	Total (for filings under Rule 504 only)	· · · · · · · · · · · · · · · · · · ·	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		
	Total		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		⊠ \$ <u>15,000</u>
	Legal Fees	•••••	⋈ \$ <u>1,000</u>
	Accounting Fees		\$
	Engineering Fees		
	Sales Commissions (specify finder's fees separately)		
	Other Expenses (identify)		
	Total		№ \$ <u>16,000</u>

	C. OFFERING PRICE, NUMBER OF II	NVESTORS, EXPENSE	S AND U	JSE OF PROCEE	DS	
	b. Enter the difference between the aggregate offering to Part C - Question 1 and total expenses furnished Question 4.a. This difference is the "adjusted gross pro	in response to Part C -			\$ <u>149,984,000</u>	
5.	5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish and estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Directors, & Affiliates					
	Salaries and fees		□ \$_		\$	
	Purchase of real estate		□ \$_		\$	
	Purchase, rental or leasing and installation of machinery	y and equipment	□.\$_		\$	
	Construction or leading of plant buildings and facilities		□ \$_		\$	
	Acquisition of other businesses (including the value involved in this offering that may be used in exchange of securities of another issuer pursuant to a merger)	for the assets	□ \$		□ \$	
	Repayment of indebtedness		□ \$	ا ماسور	□ \$	
	Working capital		□ \$		□ \$	
	Other (specify) Investment Capital		⊠ \$14	19,984,000	□ \$	
	Column Totals		⊠ \$14	19,984,000	□ \$	
	Total Payments Listed (column totals added)			\$149,984,000		
	Tour Taymona Ziotea (committeend added)			V #142420 4000		
	D. FEDE	ERAL SIGNATURE				
follow	suer has duly caused this notice to be signed by the unding signature constitutes an undertaking by the issuer to of its staff, the information furnished by the issuer to any	o furnish to the U.S. See	curities a	and Exchange Control to paragraph (b)(2	mmission, upon written	
	(Print or Type) tyView Alternative Blend Fund, LLC	Signature	5	Date 10/	X6/07	
Name	of Signer (Print or Type)	Title of Signer (Print or	Type)	(ι	
Steve	n S. Rogers	Vice President and Assistant Secretary of Neuberger Berma Asset Management, LLC, the Manager				
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ATTENTION